

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number:

3235-0076 April 30, 2008

Expires: April 30 Estimated average burden Hours per response: 16.00

SEC USE ONLY

Prefix Serial

					D6046365 — —
Name of Offering (check in CLSP II, L.P.	f this is an amendment and name	has changed, an	d indicate chan	ge.)	
Filing Under (Check box(es) tha	t apply): Rule 504 Rule	505 🛭 Rule	506 🔲 Secti	on 4(6) ULOE	
Type of Filing:	ng 🛮 Amendment				
	A. BASIC	DENTIFICAT	ION DATA		
1. Enter the information requeste	ed about the issuer	_			
Name of Issuer (check if this CLSP II, L.P.	s is an amendment and name has	changed, and in	licate change.)		
Address of Executive Offices (No c/o Cooper Hill Partners, LLC, 7		(Including Area Code) 2) 351-1970			
Address of Principal Business Of (if different from Executive Office)	perations (Number and Street, Cit				(Including Area Code)
Brief Description of Business	To operate as a private investm	ent limited partr	iership.		PROCESSED
Type of Business Organization					SEP 1 4 2000 -
corporation		ready formed	ot ot	her (please specify):	SEP 14 2006 E
business trust	limited partnership, to	be formed			THOMSUN FINANCIAL
Actual or Estimated Date of Inco	rporation or Organization:	Month <u>03</u>	Year <u>00</u>	Actual Es	stimated
Jurisdiction of Incorporation or C	Organization (Enter two-letter U.S CN for Canada; FN			or State:	<u>DE</u>
GENERAL INSTRUCTIONS Federal:					

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter ☐ Beneficial Owner Executive Officer ☐ Director General Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Cooper Hill Partners, LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o Cooper Hill Partners, LLC, 767 Third Avenue, 22nd Floor, New York, New York 10017 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Promoter Check Box(es) that Apply: ☐ Beneficial Owner ■ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA

					B. IN	FORMATI	ON ABOU	T OFFERI	NG				
1. 2.	Aı	nswer also	i, or does the in Append	lix, Columr	12, if filing	under UL	OE.		_			No ⊠ 000,000*	
			scretion of t									,	
3. 4.	Enter the remuner person of five (5)	e informat ation for s or agent of	solicitation of a broker or be listed as	ed for each of purchase dealer reg	person whers in conne istered with	o has been ection with the SEC a	or will be p sales of sec and/or with	oaid or give curities in t a state or s	en, directly he offering. tates, list th	or indirectl If a perso te name of	ly, any com n to be liste	ed is an ass or dealer. I	ociated f more than
Full Na	me (Last	name first	, if individu	ıal)									
			lress (Numl	per and Stre	eet, City, S	tate, Zip Co	ode)						
Name o	f Associa	ted Broke	r or Dealer			_							
			ted Has Sol or check inc			licit Purcha	asers					☐ All	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last	name first	, if individ	ıal)									
Busines	s or Resi	dence Ado	dress (Numb	ber and Str	eet, City, S	tate, Zip Co	ode)						
Name o	f Associa	ted Broke	r or Dealer										
			ted Has Sol or check inc			licit Purcha	asers					☐ Al	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last	name first	t, if individ	ual)									
Busines	s or Resi	dence Ado	iress (Numi	ber and Str	eet, City, S	tate, Zip Co	ode)						
Name o	f Associa	ited Broke	r or Dealer										
			ted Has Sol or check in			olicit Purch	asers	· · · ·				☐ Al	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Na	me (Last	name firs	t, if individ	ual)									
Busines	s or Resi	dence Ado	dress (Num	ber and Str	eet, City, S	tate, Zip C	ode)						
Name o	f Associa	ated Broke	er or Dealer										
			ted Has Sol or check in			olicit Purch	asers					☐ Al	l States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$0	\$0
Equity	\$0	\$0
[] Common[] Preferred	\$0	\$0
Convertible Securities (including warrants)	\$0	\$0
Partnership Interests	\$500,000,000	\$236,292,537
Other (Specify)	\$	\$
Answer also in Appendix, Column 3, if filing under ULOE.	\$500,000,000	\$236,292,537

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	147	\$236,292,537
Non-accredited Investors	0	\$0
Total (for filing under Rule 504 only)		\$

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Type of Offering	Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

· · · · · · · · · · · · · · · · · · ·		
Transfer Agent's Fees	[]	\$ 0
Printing and Engraving Costs	[X]	<u>* </u>
Legal Fees	[X]	<u>*</u>
Accounting Fees	[X]	<u>* * </u>
Engineering Fees.	[]	\$ 0
Sales Commissions (specify finders' fees separately)	[]	\$ 0
Other Expenses (identify) (organizational fees)	[X]	<u>* </u>
Total	[X]	\$ 0

Each Partner will bear its pro-rata share of the organizational and offering expenses.

b. Enter the difference between the aggregate offering price given in respons expenses furnished in response to Part C - Question 4.a. This difference is th issuer."	e "ad	justed	d gross proceeds	to the		\$500,000,000
Indicate below the amount of the adjusted gross proceeds to the issuer used o purposes shown. If the amount for any purpose is not known, furnish an esting estimate. The total of the payments listed must equal the adjusted gross procedure C - Question 4.b above.	mate	and c	heck the box to t	he left	of the	
			Payments to Officers, Directors, & Affiliates			Payments to Others
Salaries and fees	[]	\$	_ []	\$
Purchase of real estate	[1.	\$	_ [1	\$
Purchase, rental or leasing and installation of machinery and equipment	[]	\$]]	\$
Construction or leasing of plant buildings and facilities	[]	\$	_ []	\$
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]	\$	_ []	<u>\$</u>
Repayment of indebtedness	[}	\$	_ []	\$
Working capital	[}	\$	_ [}	\$
Other (specify): Investment Capital	[]	\$	_ [X]	\$500,000,000
Column Totals]]	\$	_ [X]	\$500,000,000
Total Payments Listed (column totals added)			[X]	\$500,	0,000	00
D. FEDERAL SIGN	ATUI	RE				

Title of Signer (Print or Type)

Signature

Chief Operating Officer/Chief Financial Officer of the General Partner

Date

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

Issuer (Print or Type)

Name of Signer (Print or Type)

CLSP II, L.P.

E. Peter Freer

			GN			

		Yes	No	
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?	[] [J
		Not App		

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law. Not Applicable
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. Not Applicable
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. **Not Applicable**

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) CLSP II, L.P.	Signature (Date 9/7/06
Name (Print or Type)	Title (Print or Type)	
E. Peter Freer	Chief Operating Officer/Chief Financial Officer of t	he General Partner

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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APPENDIX

CLSP II, L.P.

	CLSP II, L.P. 4								
1	Intend to non-acci investo Stat (Part B-I	redited ors in te	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	Limited Partnership Interests - \$500,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL		X	X	1	\$200,000	0	0		
AK	ļ	<u> </u>							
AR									
AZ		X	X	1	\$250,000	0	0		
CA		X	X	13	\$14,500,000	0	0	ļ <u>.</u>	
CO									
CT	<u> </u>	X	X	15	\$25,050,000	0	0		
DE		X	X	13	\$3,900,000	0	0		
DC			ļ					<u> </u>	
FL	<u> </u>	X	X	7	\$5,500,000	0	0	ļ Ļ————	ļ
GA									
HI								ļ 	
ID									
IL		X	X	1	\$2,000,000	0	0	ļ	ļi
IN									<u> </u>
IA	<u> </u>			ļ					<u> </u>
KS								<u> </u>	ļ
KY		X	X	1	\$20,000,000	0	0		<u> </u>
LA					010 (50 5 5			ļ	
MA	ļ	X	X	7	\$10,628,354	0	0		
MD		X	X	1	\$1,080,000	0	0	 	
ME		ļ		ļ <u>.</u>		<u> </u>		ļ	
MI	<u> </u>							ļ	ļ
MN		X	X	2	\$1,500,000	0	0		
МО	ļ	ļ							
MS	<u> </u>			<u> </u>				<u> </u>	

APPENDIX

CLSP II, L.P.

r	 _			CLS	6P II, L.P. 4				<u></u>
1	2		3		5 Not Applicable				
	Intend to non-accr investo Star (Part B-I	redited ors in te	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of	investor and amo (Part C-I	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Partnership Interests - \$500,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									<u> </u>
NC		X	X	6	\$4,400,000	0	0		
ND									
NE									
NH									
NJ		X	X	9	\$18,500,000	0	0		
NM									
NV									
NY		X	X	63	\$117,684,183	0	0		
ОН		Х	X	3	\$5,100,000	0	0		
OK		<u></u>			_				
OR									
PA		X	X	1	\$500,000	0	0		
RI									
SC	<u> </u>								
SD									
TN	<u> </u>								<u> </u>
TX		X	X	2	\$1,500,000	0	0		
UT						<u> </u>			
VA									
VT		<u> </u>							
WA		X	X	1	\$4,000,000	0	0		
WI									
WV									
WY	<u> </u>	ļ							
PR	<u> </u>								